

**New York State Department of Health**  
**1% STATEWIDE ASSESSMENT – PUBLIC GOODS POOL**  
**2005 Remittance Advice Form**  
*(FOR DISCHARGES ON OR AFTER JANUARY 1, 2005)*

Hospital: \_\_\_\_\_ Operating Certificate No.: \_\_\_\_\_  
For Month of: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

**WHOLE DOLLARS ONLY**

Net Patient Services Revenue Determination (See General Instructions)

1. Total 2005 Net Patient Services Revenue Received, including surcharges (*Note A*)  
(from Line 1 of the 2005 Public Goods Pool-Hospital Inpatient Services Report) \_\_\_\_\_
2. Less Revenue Non-Assessable for the Statewide Assessment:
  - a. Revenue Received from a Public Hospital Pursuant to an Affiliation Agreement  
Contract (from Line 2(d) of the 2005 Public Goods Pool-Hospital  
Inpatient Services Report) \_\_\_\_\_
  - b. Revenue Received for Residential Health Care and Hospice Services (from Line  
2(e) of the 2005 Public Goods Pool-Hospital Inpatient Services Report) \_\_\_\_\_
  - c. Physician Practice or Faculty Practice Plan Revenue Based on Discrete Billings  
for Private Practicing Physician Services (from Line 2(f) 2005 Public Goods  
Pool-Hospital Inpatient Services Report) \_\_\_\_\_
  - d. Payments received directly from the Public Goods Pool (from Line 2(g) of the  
2005 Public Goods Pool-Hospital Inpatient Services Report) \_\_\_\_\_
  - e. Governmental Deficit Financing Grants (from Line 2(h) 2005 Public Goods Pool-  
Hospital Inpatient Services Report) \_\_\_\_\_
  - f. **Non-GME** Pool Distributions from the Public Goods Pools and NYPHRM Pool  
Distributions (*Important - See Instructions*) \_\_\_\_\_
3. Total Non-Assessable Revenue (sum of Lines 2a through 2f) \_\_\_\_\_
4. Total Assessable Revenue Received (Line 1 minus Line 3) \_\_\_\_\_
5. Less Gross Surcharges Payable (from Line 14 of the Public Goods Pool-Hospital  
Inpatient Services Report) \_\_\_\_\_
6. Net Assessable Revenue Received (Line 4 minus Line 5) \_\_\_\_\_
7. Statewide Assessment (Line 6 x 1.00%) \_\_\_\_\_
8. Plus/Minus Prior 2005 Overpayments/Underpayments \_\_\_\_\_
9. Amount Due the Statewide Assessment (Line 7 minus Line 8) \_\_\_\_\_

**Make check payable to: Public Goods Pool (SW). Mail Check to:**

Mr. Jerome Alaimo, Director  
Office of Pool Administration  
Excelsus BlueCross BlueShield, Central New York Region  
344 South Warren Street  
Syracuse, New York 13202-2008

(A) Including recoveries received from 2005 accounts receivable previously written off as uncollectible.